



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

• NYD013561001

INSTALLATION ADDRESS

CONSOLIDATED AIRCRAFT SUPPLY CO INC
138 GREELEY AV
SAYVILLE NY 11782

138 GREELEY AV
SAYVILLE NY 11782

ORIE MATZA, Pres.

Consolidated AIRCRAFT SUPPLY CO., INC.

PAB



Foreign & Domestic Sales
138 GREELEY AVENUE, SAYVILLE, L. I., N. Y. 11782

Telephone: 516/589-6400

Cable Address CONAIRSUP

October 24, 1983

Mr. Ernest A. Regna
Chief, Solid Waste Branch
Air and Waste Management Division
U.S. Environmental Protection Agency, Region II
26 Federal Plaza
New York NY 10278

Dear Mr. Regna:

Re: EPA Identification Number: NYD013561881
Letter dated August 25, 1983

In response to your letter we have taken the following remedial actions:

- [1] 40 CFR 262.31 We have obtained the proper labeling and our collection drum has been properly labeled.
- [2] 40 CFR 262.32a We have obtained the proper labeling and our collection drum is properly identified for shipment.
- [3] 40 CFR 262.32b We have marked our collection drum per 262.32.
- [4] 40 CFR 265.13b A waste analysis plan has been written.
- [5] 40 CFR 265.15 A log has been opened to record the condition of waste handling equipment and the amount of waste collected and transported.
- [6] 40 CFR 265.16D We now have written documentation on personnel and job-related training.
- [7] 40 CFR 265.51 At present there is no imaginable way for a spillage to occur. In the very unlikely event that this does happen, we have ample protective clothing to protect clean-up personnel.
- [8] 40 CFR 265.73 We now have an operating record with a description, quantity and location of the waste we generate and store.

[8] CFR 265.112 At this time there is no possible waste accident that would cause our facility to close. We generate approximately 55 gallons of water soluble, non-flammable sludge per year. In the unlikely event that we would have to close, there is sufficient manpower and resources to handle any anticipated problem.

We hope this is satisfactory to fulfill your requirements.

Very truly yours,

CONSOLIDATED AIRCRAFT SUPPLY CO., INC.



Steven Matza
Vice President

c.c.: Richard A. Baker
Chief, Permits Administration Branch
U.S. Environmental Protection Agency, Region II
26 Federal Plaza
New York, NY 10278

and

James Heil
Regional Solid Waste Engineer, Region 1
New York State Department of Environmental Conservation
Building 40
State University of New York
Stony Brook NY 11790

SM/dr

I.D. - FOR OFFICIAL USE ONLY

S	W	NY	D	0	1	3	5	6	1	8	8	1	2	1
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F018 23 - 26	2 23 - 26	3 23 - 26	4 23 - 26	5 23 - 26	6 23 - 26
7 23 - 26	8 23 - 26	9 23 - 26	10 23 - 26	11 23 - 26	12 23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 23 - 26	14 23 - 26	15 23 - 26	16 23 - 26	17 23 - 26	18 23 - 26
19 23 - 26	20 23 - 26	21 23 - 26	22 23 - 26	23 23 - 26	24 23 - 26
25 23 - 26	26 23 - 26	27 23 - 26	28 23 - 26	29 23 - 26	30 23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 23 - 26	32 23 - 26	33 23 - 26	34 23 - 26	35 23 - 26	36 23 - 26
37 23 - 26	38 23 - 26	39 23 - 26	40 23 - 26	41 23 - 26	42 23 - 26
43 23 - 26	44 23 - 26	45 23 - 26	46 23 - 26	47 23 - 26	48 23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49 23 - 26	50 23 - 26	51 23 - 26	52 23 - 26	53 23 - 26	54 23 - 26
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)


☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE 	NAME & OFFICIAL TITLE (type or print) STEVEN MATZA U.P.	DATE SIGNED 5/1/80
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RESPONDENT CONTACT RECORD (RCR)

FACILITY ID NUMBER N 4 D 0 1 3 5 6 1 8 8 1										COMPANY NAME Consolidated Aircraft Supply Co. Inc.																
COMPANY ADDRESS 138 Greeley Ave.															CITY Sayville					STATE ABBREV. NY			ZIP CODE 11782			
CONTACT PERSON'S NAME/TITLE Steven Matza, vice pres.															TELEPHONE NUMBER (INCLUDE AREA CODE) 516 589-6400											

CONTACT RECORD																
DATE	CONTRACTOR'S INITIALS			ITEMS DISCUSSED/RESOLUTION												
				map lat/long												
7/27/81	VC			will mail in info.												
10/2	VC			will mail in info												
10/30	VC			send map lat. 40° 44' 30"												
				long. 73° 05' 10"												

Consolidated Aircraft Supply Co. Inc.

1

DATE RETURNED _____
REASON _____☐ ACKNOWLEDGEMENT SENT

INTERNAL CHECKLIST

ID # NYDO13561881Complete

1. Interim Regulatory Requirements

A. (1) FORM 1 MISSING ☐(2) FORM 3 MISSING ☐B. POSTMARK after NOVEMBER 19, 1980 ☐ Valid ☐C. (1) DATE of OPERATION MISSING ☐(2) DATE of OPERATION after NOVEMBER 19, 1980 ☐D. (1) NON-ACDIFIER ☐
(2) NOTIFIED after AUGUST 18, 1980 5/1 ☐ Valid ☐E. (1) FORM 1, VIII B SIGNATURE MISSING ☐(2) FORM 3, IX B SIGNATURE MISSING ☐

2. { A. HANDLER
- ☐
-
- B. NONREGULATED
- ☐
-
- C. UNSURE
- ☐

D. UNKNOWN FACILITY ☐
(missing name and address on Form 3)E. NEW FACILITY > NOV. 19, 1980 ☐F. CORE ITEM(S) MISSING ☐G. NON-CORE ITEM(S) MISSING ☐H. OTHER ☐MISSING:MAP ☒DRAWING ☐PHOTO ☐

PA. 3.

FORM 1 GENERAL	 EPA	U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION <i>Consolidated Permits Program</i> <i>(Read the "General Instructions" before starting.)</i>	I. EPA I.D. NUMBER <div style="border: 1px solid black; padding: 2px;"> NYD0135618813 </div>
LABEL ITEMS I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION		<div style="border: 1px solid black; padding: 5px;"> NAME: PRESS HARD WHEN FILLING IN NAME & ADDRESS. HERE STREET ADDRESS: CITY, STATE, & ZIP CODE: </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> CONSOL. AIRCRAFT SUPPLY CO INC. 138 GREELEY AV. SAYVILLE N.Y. 11782 </div>	

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1	SKIP	CONSOLIDATED AIRCRAFT SUPPLY CO INC
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IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 MATZA STEVEN VICE PRES	516 589 6400

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX			
3	138 GREELEY AV		
B. CITY OR TOWN		C. STATE	D. ZIP CODE
4	SAYVILLE	NY	11782

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER			
5	138 GREELEY AV SAYVILLE NY		
B. COUNTY NAME			
SUFFOLK			
C. CITY OR TOWN		D. STATE	E. ZIP CODE
6	SAYVILLE	NY	11782

VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND									
C	7	7	6	2	9	(specify)					C	7	(specify)						
15	16	17	18	19						15	16	17	18	19					
C. THIRD										D. FOURTH									
C	7	(specify)								C	7	(specify)							
15	16	17	18	19						15	16	17	18	19					

VIII. OPERATOR INFORMATION

A. NAME															B. Is the name listed in Item VIII-A also the owner?				
C	8	CONSOLIDATED AIRCRAFT SUPPLY CO INC													<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 66				
15	16																		

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL
S = STATE
P = PRIVATE

M = PUBLIC (other than federal or state)
O = OTHER (specify)

P (specify)

D. PHONE (area code & no.)

A 516 589 6400

E. STREET OR P.O. BOX

138 GREELEY AVE

F. CITY OR TOWN

SAYVILLE

G. STATE

NY

H. ZIP CODE

11782

IX. INDIAN LAND

Is the facility located on Indian lands?

☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)									
C	9	N								C	9	P							
15	16	17	18	19	20	21	22	23	24	15	16	17	18	19	20	21	22	23	24
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
C	9	U								C	9	(specify)							
15	16	17	18	19	20	21	22	23	24	15	16	17	18	19	20	21	22	23	24
C. RCRA (Hazardous Wastes)										E. OTHER (specify)									
C	9	R								C	9	(specify)							
15	16	17	18	19	20	21	22	23	24	15	16	17	18	19	20	21	22	23	24

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements. F9: N/50

XII. NATURE OF BUSINESS (provide a brief description)

Aircraft accessory overhaul. Starters, generators pumps.

*NOTE: These wastes will be stored no longer than 2 months, and then sent by truck to an authorized disposal facility in New Jersey. F9: A/51

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)										B. SIGNATURE										C. DATE SIGNED									
STEVEN MATZA V.P.										Steven Matza										6/1/81									

COMMENTS FOR OFFICIAL USE ONLY

C														
C														
15	16													55

<div style="display: flex; align-items: center; justify-content: center;"><div style="text-align: center; margin-right: 10px;">FORM 3 RCRA</div><div style="text-align: center; margin-right: 10px;"></div><div style="text-align: center;">U.S. ENVIRONMENTAL PROTECTION AGENCY HAZARDOUS WASTE PERMIT APPLICATION <i>Consolidated Permits Program</i> <small>(This information is required under Section 3005 of RCRA.)</small></div></div>		I. EPA I.D. NUMBER																																																																																													
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<p>Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.</p>																																																																																															
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>A. FIRST APPLICATION (place an "X" below and provide the appropriate date)</p><div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p><input checked="" type="checkbox"/> 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)</p><div style="display: flex; justify-content: space-between;"><div style="width: 30%;"><p>C 73 74 75 76 77 78</p><p>73 74 75 76 77 78</p></div><div style="width: 70%;"><p>FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)</p></div></div></div><div style="width: 48%;"><p><input type="checkbox"/> 2. NEW FACILITY (Complete item below.)</p><div style="display: flex; justify-content: space-between;"><div style="width: 30%;"><p>C 73 74 75 76 77 78</p><p>73 74 75 76 77 78</p></div><div style="width: 70%;"><p>FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN</p></div></div></div></div></div></div>																																																																																															
<p>B. REVISED APPLICATION (place an "X" below and complete Item I above)</p> <div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p><input type="checkbox"/> 1. FACILITY HAS INTERIM STATUS</p></div><div style="width: 48%;"><p><input type="checkbox"/> 2. FACILITY HAS A RCRA PERMIT</p></div></div>																																																																																															
III. PROCESSES - CODES AND DESIGN CAPACITIES																																																																																															
<p>A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).</p>																																																																																															
<p>B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.</p> <div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><p>1. AMOUNT - Enter the amount.</p><p>2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.</p></div><div style="width: 4%;"></div><div style="width: 48%;"><table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>PROCESS</th><th>PRO- CESS CODE</th><th>APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY</th></tr></thead><tbody><tr><td colspan="3">Storage:</td></tr><tr><td>CONTAINER (barrel, drum, etc.)</td><td>S01</td><td>GALLONS OR LITERS</td></tr><tr><td>TANK</td><td>S02</td><td>GALLONS OR LITERS</td></tr><tr><td>WASTE PILE</td><td>S03</td><td>CUBIC YARDS OR CUBIC METERS</td></tr><tr><td>SURFACE IMPOUNDMENT</td><td>S04</td><td>GALLONS OR LITERS</td></tr><tr><td colspan="3">Disposal:</td></tr><tr><td>INJECTION WELL</td><td>D79</td><td>GALLONS OR LITERS</td></tr><tr><td>LANDFILL</td><td>D80</td><td>ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER</td></tr><tr><td>LAND APPLICATION</td><td>D81</td><td>ACRES OR HECTARES</td></tr><tr><td>OCEAN DISPOSAL</td><td>D82</td><td>GALLONS PER DAY OR LITERS PER DAY</td></tr><tr><td>SURFACE IMPOUNDMENT</td><td>D83</td><td>GALLONS OR LITERS</td></tr></tbody></table><div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>UNIT OF MEASURE</th><th>UNIT OF MEASURE CODE</th></tr></thead><tbody><tr><td>GALLONS</td><td>G</td></tr><tr><td>LITERS</td><td>L</td></tr><tr><td>CUBIC YARDS</td><td>Y</td></tr><tr><td>CUBIC METERS</td><td>C</td></tr><tr><td>GALLONS PER DAY</td><td>U</td></tr></tbody></table></div><div style="width: 48%;"><table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>UNIT OF MEASURE</th><th>UNIT OF MEASURE CODE</th></tr></thead><tbody><tr><td>LITERS PER DAY</td><td>V</td></tr><tr><td>TONS PER HOUR</td><td>D</td></tr><tr><td>METRIC TONS PER HOUR</td><td>W</td></tr><tr><td>GALLONS PER HOUR</td><td>E</td></tr><tr><td>LITERS PER HOUR</td><td>H</td></tr></tbody></table></div></div></div></div>																						PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	Storage:			CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	S02	GALLONS OR LITERS	WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	Disposal:			INJECTION WELL	D79	GALLONS OR LITERS	LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER	LAND APPLICATION	D81	ACRES OR HECTARES	OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY	SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS	UNIT OF MEASURE	UNIT OF MEASURE CODE	GALLONS	G	LITERS	L	CUBIC YARDS	Y	CUBIC METERS	C	GALLONS PER DAY	U	UNIT OF MEASURE	UNIT OF MEASURE CODE	LITERS PER DAY	V	TONS PER HOUR	D	METRIC TONS PER HOUR	W	GALLONS PER HOUR	E	LITERS PER HOUR	H														
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SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY																																																																																													
INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR																																																																																													
OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or inciner- ators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY																																																																																													
<p>EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.</p>																																																																																															
D U P																																																																																															
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32																																																																																															
<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th rowspan="2">LINE NUMBER</th><th rowspan="2">A. PRO- CESS CODE (from list above)</th><th colspan="2">B. PROCESS DESIGN CAPACITY</th><th rowspan="2">FOR OFFICIAL USE ONLY</th><th rowspan="2">LINE NUMBER</th><th rowspan="2">A. PRO- CESS CODE (from list above)</th><th colspan="2">B. PROCESS DESIGN CAPACITY</th><th rowspan="2">FOR OFFICIAL USE ONLY</th></tr><tr><th>1. AMOUNT (specify)</th><th>2. UNIT OF MEA- SURE (enter code)</th><th>1. AMOUNT</th><th>2. UNIT OF MEA- SURE (enter code)</th></tr></thead><tbody><tr><td>X-1</td><td>S 0 2</td><td>600</td><td>G</td><td></td><td>5</td><td></td><td></td><td></td><td></td></tr><tr><td>X-2</td><td>T 0 3</td><td>20</td><td>E</td><td></td><td>6</td><td></td><td></td><td></td><td></td></tr><tr><td>1</td><td>S 0 1</td><td>2000</td><td></td><td></td><td>7</td><td></td><td></td><td></td><td></td></tr><tr><td>2</td><td></td><td></td><td></td><td></td><td>8</td><td></td><td></td><td></td><td></td></tr><tr><td>3</td><td></td><td></td><td></td><td></td><td>9</td><td></td><td></td><td></td><td></td></tr><tr><td>4</td><td></td><td></td><td></td><td></td><td>10</td><td></td><td></td><td></td><td></td></tr></tbody></table>																						LINE NUMBER	A. PRO- CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO- CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY	1. AMOUNT (specify)	2. UNIT OF MEA- SURE (enter code)	1. AMOUNT	2. UNIT OF MEA- SURE (enter code)	X-1	S 0 2	600	G		5					X-2	T 0 3	20	E		6					1	S 0 1	2000			7					2					8					3					9					4					10				
LINE NUMBER	A. PRO- CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO- CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY																																																																																						
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III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. **EPA HAZARDOUS WASTE NUMBER** — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. **ESTIMATED ANNUAL QUANTITY** — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. **UNIT OF MEASURE** — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
POUNDS. P
TONS. T

METRIC UNIT OF MEASURE CODE
KILOGRAMS. K
METRIC TONS. M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
							1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K	0	5	4	900	P	T 0 3 D 8 0	
X-2	D	0	0	2	400	P	T 0 3 D 8 0	
X-3	D	0	0	1	100	P	T 0 3 D 8 0	
X-4	D	0	0	2				included with above

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY																					
<div> <div>W</div> <div>NYD013561881</div> <div> <div>T/A</div> <div>C</div> <div>3</div> <div>1</div> </div> </div>													<div> <div>W</div> <div>DUP</div> <div> <div>T/A</div> <div>C</div> <div>3</div> <div>2</div> </div> <div>DUP</div> </div>																					
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																																		
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE				C. UNIT OF MEASURE (enter code)	D. PROCESSES																								
										1. PROCESS CODES (enter)				2. PROCESS DESCRIPTION (if a code is not entered in D(1))																				
	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56
1	F	0	1	8						P					5	0	1	D	8	3														
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IV. DESCRIPTION OF HAZARDOUS WASTES (continued)**E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.**

EPA I.D. NO. (enter from page 1)																
S	F	N	Y	D	0	1	3	5	6	1	8	8	1	T/A/C	3	6
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17

F6: $\frac{A}{55}$ F6: $\frac{A}{56}$ **V. FACILITY DRAWING**

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

40 44 030

LONGITUDE (degrees, minutes, & seconds)

073 06 010

VIII. FACILITY OWNER
☐ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

E ARON CZUCHMAN

516-589-1465

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

F 138 GREELEY AV.

G SAYVILLE

NY

11782

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

ARON CZUCHMAN

Aron Czuchman

5/28/81

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

STEVEN MATZA

Steven Matza

5/28/81

CONSOLIDATED AIRCRAFT SUPPLY CO., INC.

138 GREELEY AVENUE
SAYVILLE, NEW YORK 11782
Phone: (516) 589-6400

DATE 10/26/81

SUBJECT

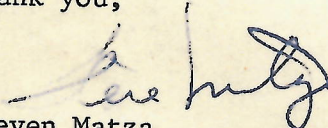
TO Information Service Center
EPA Region 2
26 Federal Plaza
New York, NY 10278

Gentlemen:

Enclosed please find the map supplied as requested.
Our I.D. # is N.Y. DO 13561881

Longitude 73° 05' 10"
Latitude 40° 44' 30"

Thank you,



Steven Matza
Vice-President

SM:sg

SIGNED

73°08'

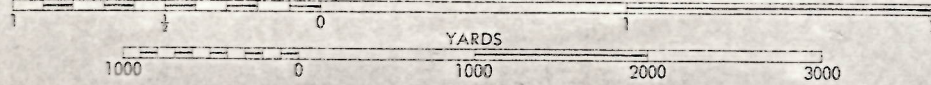
SCALE 1:40,000
NAUTICAL MILES

73°06'

40°46'

73°04'

2 240



BROWN CREEK

The controlling depth of mean low water was 4 feet for a width of 100 feet from deep water in Great South Bay to Swezey Boat Yard, 40°43'42"N, 70°04'17"W, thence in Sept. 1959 a depth of 2 feet with local knowledge to Sayville Highway Bridge. June 1960

LAT. 40°44'30"
LON. 73°05'10"

FISH TRAP AREAS

Boundary lines of fish trap areas are shown thus: _____
Caution: Submerged piling may exist in these areas.

CONSOLIDATED
AIRCRAFT SUPPLY CO INC
139 GREELEY AV.
SAYVILLE N.Y. 11782



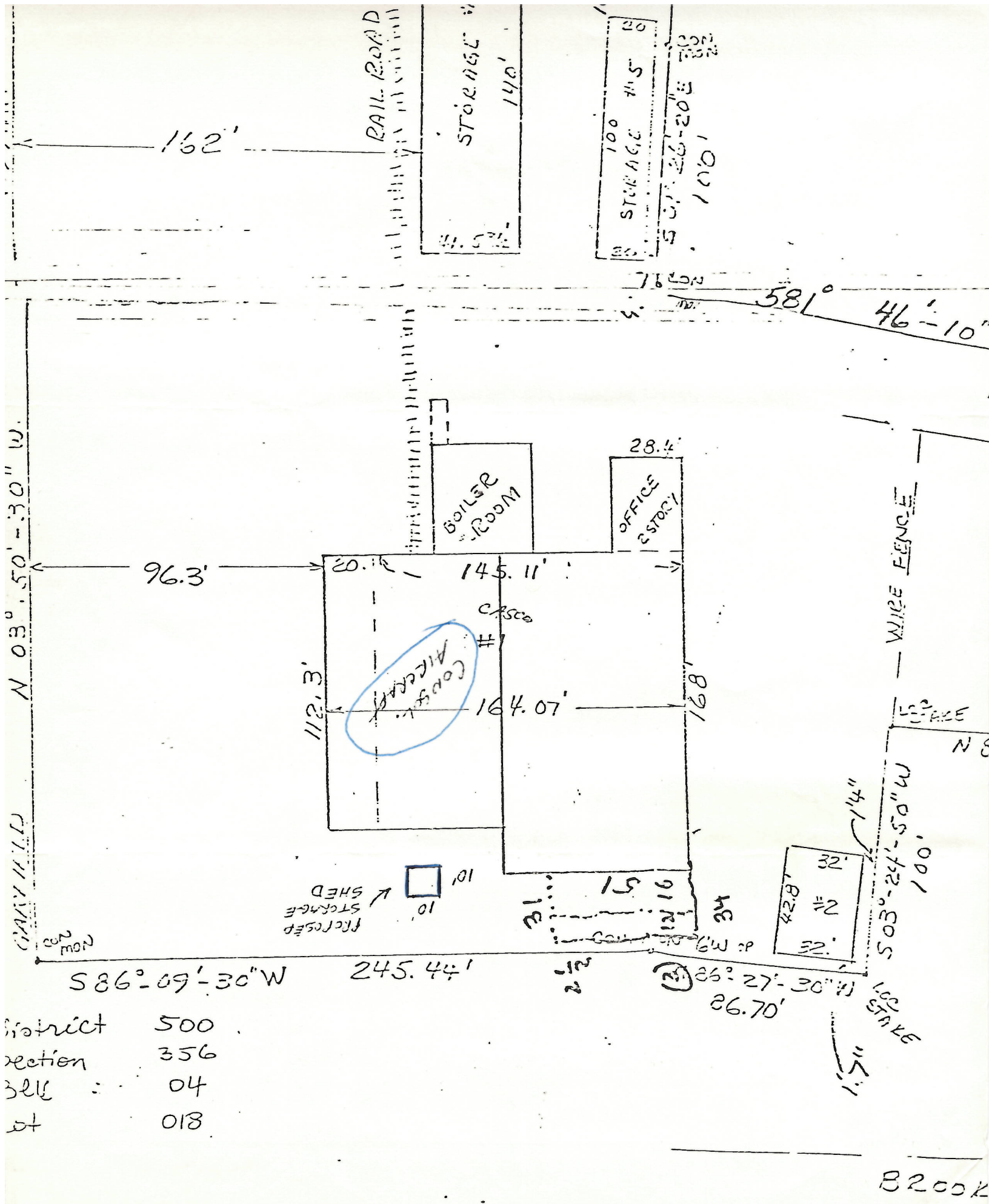


STORAGE
SHED AT REAR
OF BUILDING



V. FACILITY DRAWING (see page 4)

Consolidated Aircraft Supply Co., Inc.



District 500
 Section 356
 Block 04
 Lot 018

BRook

NYD013561881

ORIE MATZA, Pres.

Consolidated AIRCRAFT SUPPLY CO., INC.



Foreign & Domestic Sales
138 GREELEY AVENUE, SAYVILLE, L. I., N. Y. 11782

Telephone: 516/589-6400

Cable Address CONAIRSUP

July 7, 1982

United States Environmental
Protection Agency
Region II
26 Federal Plaza
New York, NY 10278

Attention: Dr. Richard Baker
Chief of Permits Administration Branch

Dear Sir:

Regarding Mr. Kenneth Stoller's letter on financial assurance and liability requirements, Consolidated Aircraft is not a "T.S.D." type facility. I have discussed this matter with Mr. Larry Tierney in the upstate E.P.A. office and Mrs. Janet DiBiasio at the Federal Plaza office.

Consolidated Aircraft is a "small generator" and should not come under these guidelines. We generate approximately 100 gallons of waste water per month which is transported and disposed of by an E.P.A. approved vendor.

If there are any questions, please contact me.

Very truly yours,

CONSOLIDATED AIRCRAFT SUPPLY CO., INC.

Steven Matza
Vice President

SM/dr

PAID
JUL 12 1 04 PM '82
ENVIRONMENTAL PROTECTION
AGENCY
NEW YORK, N.Y. 10007

NYD013561881

NYD013561881

debit
750
Stoller
debit c 119,1105
add c 303 = 2
Check file if
non-handlers
none

JH
HWDMS
9/29/82

47-15-15(7/82)

RCRA INSPECTION FORM

PERMITS ADMIN. BRANCH
REGION II
APR 23 3 01 PM '83
ENVIRONMENTAL PROTECTION
AGENCY
NEW YORK, N.Y. 10007

Report Prepared for:

Generator ☒

Transporter ☐

HWM (TSD) facility ☒

Copy of report sent to the facility ☐

Loc. Code

47 2800

Facility Information

Name: Consolidated Aircraft

Address: 138 Greeley Ave
Sayville NY 11782

EPA ID#: NYD 013 561 881

Date of Inspection: April 19, 1983

Participating Personnel

State or EPA Personnel: J. Austin
NYSDEC

Facility Personnel: Steven Matza
V.P.

Report Prepared by Name: J. Austin

Agency: NYSDEC

Telephone #: (516) 751 7900

Approved for the Director by: James H. Lee
REGIONAL SOLID WASTE ENGINEER
REGION I - NYSDEC

9

Summary of Findings

Facility Description and Operations

Paint removal, with industrial paint
stripper, from aircraft parts.

~~the~~ rinse water is evaporated &
sludge collected for removal - approx.
1 drum/year.

Describe the activities that result in the generation of hazardous waste.

Paint stripping and evaporating of
resulting rinse waters to produce sludge

Identify the hazardous waste located on site, and estimate the approximate quantities of each. (Identify Waste Codes)

Paint Stripper sludge - D007 UX/NA 9189
less than 1 55 gal. drum

Is there reason to believe that the facility has hazardous waste on-site?

a. If yes, what leads you to believe it is hazardous waste?

Check appropriate boxes:

- ☒ Company admits that its waste is hazardous during the inspection.
- ☒ Company admitted the waste is hazardous in its RCRA notification and/or Part A Permit Application.
- ☐ The waste material is listed in the regulations as a hazardous waste from a nonspecific source (§261.31)
- ☐ The waste material is listed in the regulations as a hazardous waste from a specific source (§261.32)
- ☐ The material or product is listed in the regulations as a discarded commercial chemical product (§261.33)
- ☐ Testing has shown characteristics of ignitability, corrosivity, reactivity or extraction procedure toxicity, or has revealed hazardous constituents (please attach analysis report)
- ☐ Company is unsure but there is reason to believe that waste materials are hazardous. (Explain)

Transporter Inspection Report Form

40 CFR Part 263 Transporter Standards

	YES	NO	N/A
263.10 - Does the transporter carry hazardous waste?	___	___	<input checked="" type="checkbox"/>
263.12 - Does the transporter store hazardous waste at a transfer facility - if yes, how long?	___	___	___
___ 10 days or less			
___ more than 10 days (complete TSD form)			
263.20 - <u>Manifest System</u>			
1) Does the transporter have a copy for each manifest shipment of hazardous waste?	___	___	___
2) Does a representative portion of the manifests show the following information (if no, circle the missing information)	___	___	___
o Generator's name, address, telephone and EPA I.D. numbers, signature and date of signature	___	___	___
o Transporter's name, EPA I.D. number, signature and date of signature	___	___	___
o TSDF's name, address and EPA I.D. Number	___	___	___
and either the signature and date of the TSDF or the name, EPA I.D., signature and date of the next transporter.	___	___	___
o Manifest Document number	___	___	___
o Proper DOT shipping description	___	___	___
o Quantity & type of containers	___	___	___
(If no, to any of the above obtain copies of incomplete manifests).			
3) Based on available information, do all manifests conform to the hazardous waste shipments made? If no, explain	___	___	___
262.22 - Have records been kept since November 19, 1980?	___	___	___
263.30 - Has there ever been a spill or discharge of hazardous waste during transportation?	___	___	___
If yes, was the incident report submitted to DOT? (obtain copy of the report)	___	___	___
263.31 - If there was any spill or discharge of hazardous waste, was it cleaned up? If no, explain.	___	___	___

General Comments:

HAZARDOUS WASTE MANAGEMENT FACILITY CHECK LIST
(Facilities Subject to 40 CFR 265 Standards)

YES NO N/A

40 CFR Part 265 Subpart B General Facility Standards

265.13-General Waste Analysis

- 1) Is there a detailed chemical and physical analysis of a representative sample of the waste or each waste?
(At a minimum this analysis must contain all the information necessary for proper management of the waste)

— ✓ —

- 2) Does the character of the waste handled at the facility change from day to day, week to week, etc., thus requiring frequent testing?

You may check only one

Waste characteristics vary _____
All waste are basically the same _____ ✓
Company treats all waste as hazardous _____

- 3) Is there a written waste analysis plan at the facility?

— ✓ —

Does it contain the following:

- a) Parameters for each waste to be analyzed and the rationale for the selection of these parameters.
b) Test methods used to test these parameters.
c) Sampling methods to obtain a representative sample of the waste to be analyzed.
d) Frequency of repeated analysis to ensure accurate and current information.

— — —
— — —
— — —
— — —

- 4) Does hazardous waste come to this facility from an outside source? e.g. another generator.

— ✓ —

- 5) If waste comes from an outside source, are there procedures in the plan to insure that waste received conforms to the accompanying manifest?

— — ✓

265.14-Security

- 1) Is there: a) a 24-hour surveillance system? or,
b) a suitable barrier which completely surrounds the active portion of this facility?

— ✓ —

- 2) Are there "Danger-Unauthorized Personnel Keep Out" signs posted at each entrance to the facility?

— ✓ —

If no, explain what measures are taken for security.

265.15 - General Inspections Requirements

- 1) Does the facility have a written inspection schedule?
2) Does the schedule identify the types of problems to be looked for and the frequency of inspections?
3) Does the owner/operator record inspections in a log?
4) Is there evidence that problems reported in the inspection log have been remedied?

— ✓ —
— ✓ —
— ✓ —
— ✓ —

If no, please explain.

265.16 - Personnel Training

- | | <u>YES</u> | <u>NO</u> | <u>N/A</u> |
|--|------------|-----------|------------|
| 1) Have facility personnel successfully completed a program of classroom instruction or on-the-job training within 6 months of having been employed? | — | — | — |
| <u>If yes</u> , have facility personnel taken part in an annual review of training? | — | — | — |
| 2) Is there written documentation of the following: | | | |
| —job title for each position at the facility related to hazardous waste management and the name of the employee filling each job? | — | — | — |
| —type and amount of training to be given to personnel in jobs related to hazardous waste management? | — | — | — |
| —actual training or experience received by personnel? | — | — | — |
| 3) Are training records kept on all employees for at least 3 years? | — | — | — |

265.17-General Requirements for Ignitable, Reactive or Incompatible Wastes

- | | | | |
|---|---|---|---|
| 1) Are there ignitable, reactive or incompatible waste on site? | — | ✓ | — |
| <u>If yes</u> , what are the approximate types and quantities and location of the waste. | | | |
| 2) Have precautions been taken to prevent accidental ignition or reaction of ignitable or reactive waste? | — | — | ✓ |
| <u>If no</u> , please explain. | | | |
| 3) In your opinion, are proper precautions taken so that these wastes do not: | | | |
| — generate extreme heat or pressure, fire or explosion, or violent reaction? | ✓ | — | — |
| — produce uncontrolled toxic mist, fumes, dusts or gases in sufficient quantities to pose a risk of fire or explosions? | ✓ | — | — |
| — damage the structural integrity of the device or facility containing the waste? | ✓ | — | — |
| — threaten human health or the environment? | ✓ | — | — |

40 CFR 265 - Subpart C - Preparedness and Prevention

	<u>YES</u>	<u>NO</u>	<u>N/A</u>
265.32 Does the facility comply with preparedness and prevention requirements including maintaining:			
-- an internal communications or alarm system?	✓	—	—
-- a telephone or other device to summon emergency assistance from local authorities?	✓	—	—
-- portable fire equipment?	✓	—	—
-- water at adequate volume and pressure to supply water hose streams, foam producing equipment, etc.	✓	—	—
265.33 Is equipment tested and maintained?	✓	—	—
265.34 Is there immediate access to communications or alarm systems during handling of hazardous waste?	✓	—	—
265.35 Adequate aisle space?	✓	—	—
If no, please explain storage pattern.			
In your opinion, do the types of waste on-site require all of the above procedures, or are some not needed: Explain.	✓	—	—

40 CFR 265 - Subpart D - Contingency Plan and Emergency Procedures

Does the facility have a written contingency plan for emergency procedures designed to deal with fires, explosions or any unplanned release of hazardous waste?

	—	✓	—
1) Does the plan describe arrangements made with the local authorities?	—	—	—
2) Has the contingency plan been submitted to the local authorities?	—	—	—
3) Does the plan list names, addresses and phone numbers of Emergency Coordinators?	—	—	—
4) Does the plan have a list of what emergency equipment is available?	—	—	—
5) Is there a provision for evacuating facility personnel?	—	—	—
6) Was there an emergency coordinator present or on call at the time of the inspection?	—	—	—

40 CFR 265 Subpart E-Manifest System, Recordkeeping and Reporting

265.71 - Use of the Manifest

1) Has the facility received hazardous waste from an <u>off-site source</u> since November 19, 1980?	—	✓	—
If no, skip to 265.73 - Operating Record			
2) If yes, does it appear that the facility has a copy of a manifest for each hazardous waste load received?	—	—	—
If not, please explain.			

3) How many post-November 19 manifests does the facility have?
(Estimate if the number is large)

4) Does each manifest have the following information?
(circle missing information)

- a manifest document number?
- the generators name, mailing address, telephone number and EPA I.D. #?
- the transporters name and EPA I.D. Number?
- the TSD name, address, telephone number & EPA I.D. Number?
- a description of the waste (DOT)?
- the total quantity of each hazardous waste by units of weight or volume, and the type and number of containers as loaded; into or onto the transport vehicle?
- a certification that the materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation under regulations of the DOT and EPA?

(Obtain a copy of the incomplete manifests)

265.72 - Manifest Discrepancies

Have there been significant discrepancies between the quantity and type of waste received and the waste identified on the manifest?

Describe unreconciled discrepancies.

265.73 - Operating Record

1) Does the facility keep an operating record?

2) Does the record contain the following information:

- a) Description and quantity of waste on-site and the method(s) and date(s) of its Treatments, Storage & Disposal?
- b) The location and quantity of each hazardous waste at each location?
- c) Records and results of waste analysis and trial tests performed and identified in the waste analysis plan?
- d) Summary reports and details of all incidents that require implementing the contingency plan.
- e) Records and results of inspections for the past 3 years or November 19, 1980 whichever is less?
- f) Monitoring, testing or analytical data where required for:

Groundwater, Land Treatment, Incinerators, and Thermal Treatment?

265.76 - Unmanifested Waste Report

Has the facility accepted hazardous waste from off-site sources without a manifest?

If yes, has the facility submitted an unmanifested waste report?

40 CFR 265 Subpart F - Groundwater Monitoring

YES NO N/A

(Applies only to surface impoundments, landfills and/or land treatment facilities.)

Is a groundwater monitoring plan available at the facility? _____

If yes, please fill out the appropriate Groundwater Monitoring Questionnaire and attach to this report.

40 CFR 265 Subpart G - Closure and Post-Closure

265.111 Closure Performance Standard

Have any portions of the facility been closed since November 19, 1980? _____

If yes, please explain _____

265.112 - Closure Plan

Does the facility have a written closure plan? ✓
(Applies to all types of TSD facilities) _____

If yes, does the written plan include: _____

1. A description of how and when the facility will be partially (if applicable) and ultimately closed? _____
2. An estimate of the maximum inventory of wastes in storage or treatment at any time during the life of the facility? _____
3. A description of the steps necessary to decontaminate facility equipment during closure? _____
4. A schedule for final closure including the anticipated date when waste will no longer be received and when final closure will be completed? _____
5. Does the owner/operator have a written estimate of the cost of closing the facility? _____

If yes, what is it? (\$) _____

265.118 - Post Closure Plan

Does the facility have a written post-closure plan? _____
(Applies only to disposal facilities)

If yes, Does the Plan: _____

1. Identify the activities which will be carried on after closure and the frequency of these activities? _____
2. Include a description of planned groundwater monitoring activities and their frequency during post-closure? _____
3. Include a description of planned maintenance activities and frequency to insure integrity of final cover during post-closure? _____
4. Include the name, address and phone number of a person or office to contact during post-closure? _____
5. Does the owner/operator have a written estimate of the cost of post-closure for the facility? _____

If yes, what is it? (\$) _____

Please circle all appropriate activities and answer questions on indicated - pages for all activities circled.

<u>Storage</u>	<u>Treatment</u>	<u>Disposal</u>
Container - pg 6	Tank - pg 7	Landfill - pg 11
Tank, above ground-pg 7	Surface Impoundment-pg 8	Land Treatment - pg 10
Tank, below ground-pg 7	Incineration - pg 12	Surface Impoundments - pg 8
Surface Impoundments-pg 8	Thermal Treatment-pg 12	Other _____
Waste Piles - pg 9	Land Treatment - pg 10	
Other _____	Chemical, Physical and Biological Treatment - pg 13	
	Other _____	

YES NO N/A

40 CFR 265 - Subpart I - Containers

- 1) - What type of containers are used for storage.
Describe the size, type, quantity and nature of waste
(e.g. 12 fifty-five gallon drums of waste acetone)

1 - 55 gal drum

- 2) - Is there a containment system for spills, leaks and precipitation?

If yes, describe.

10'x15' Concrete Floor

— ✓ —

- 265.171 - Do the containers appear to be in good condition, not in danger of leaking?

If not, please describe the type, condition and number of leaking or corroded containers. Be detailed and specific.

✓ — —

- 265.172 - Are hazardous waste stored in containers made of compatible materials?

If not, please explain.

✓ — —

- 265.173(a) - Are all containers closed except those in use?

✓ — —

- 265.173(b) - Do containers appear to be properly opened, handled or stored in a manner which will minimize the risk of the container rupturing or leaking?

✓ — —

- 265.174 - Is the storage area inspected at least weekly?

✓ — —

- 265.176 - Are containers holding ignitable and reactive waste located at least 50 feet (15 meters) away from the facility's property line?

— — ✓

- 265.177 - Are incompatible wastes stored separate from each other?

— — ✓

If no, explain

GENERATOR INSPECTION CHECKLIST

40 CFR 262 Subpart A-General

YES NO N/A

262.11 - Hazardous waste determination

- 1) Did the generator test its waste to determine whether it is hazardous?

Is the waste hazardous?

☒ ☐ ☐

- 2) Is the generator determining that its waste exhibits a hazardous waste characteristic(s) based on its knowledge of the material(s) or processes used?

☒ ☐ ☐

40 CFR 262 Subpart B-The Manifest

Has hazardous waste been shipped off-site since November 19, 1980?

☒ ☐ ☐

If yes, approximately how many shipments, off-site, have been made and describe the approximate size of an average shipment made on a monthly basis. If facility is a small quantity generator, please explain.

1 - 7/6/82 2 drum D007 UN 9189

262.21 Does each manifest (or representative sample) have the following information? Please circle the missing elements.

- a manifest document number?
- the generators name, mailing address, telephone number and EPA I.D. Number?
- the transporters name and EPA I.D. Number?
- the name, address and EPA ID Number of the designated facility?
- a description of the wastes (DOT)?
- the total quantity of each hazardous waste by units of weight or volume, and the type and number of containers as loaded into or onto the transport vehicle?
- a certification that the materials are properly classified, described, package, marked and labeled, and are in proper condition for transportation under regulations of the DOT and EPA?

☒ ☐ ☐
☒ ☐ ☐
☐ ☐ ☐
☒ ☐ ☐
☒ ☐ ☐
☒ ☐ ☐
☒ ☐ ☐

(obtain a copy of the incomplete manifests)

40 CFR 262 - Subpart D - Recordkeeping and Reporting

262.40 Has the generator maintained facility records since Nov. 19, 1980? (manifest, exception report and waste analysis)

☒ ☐ ☐

262.42 Has the generator received signed copies (from the TSD facility) of all the manifests for waste shipped off-site more than 35 days ago?

☒ ☐ ☐

If not, have Exception Reports been submitted to EPA covering any of these shipments made more than 45 days ago?

☐ ☐ ☒

YES NO N/A

40 CFR 262 - Subpart C - Pretransportation Requirements

262.30-33 Before transporting or offering hazardous waste for transportation off-site does the generator:

- 1) Package the waste in accordance with applicable DOT regulations (i.e., 49 CFR Parts 173, 178 & 179) ✓
- 2) Label each package according to DOT (i.e., 49 CFR 172) ✓
- 3) Mark each package according to DOT (i.e., 49 CFR 172) ✓
- 4) Mark each container of 110 gallons or less with the words "Hazardous Waste - Federal Law Prohibits Improper Disposal. If found, contact the nearest police or public safety authority or the U.S. EPA." and include the generators name, address and manifest document number. (i.e., 49 CFR 172.304) ✓

262.34 Accumulation Time

1) How is waste accumulated on-site?

- ☒ Containers
- ☐ Tanks
- ☐ Surface impoundments (complete BMT checklist)
- ☐ Piles (complete BMT checklist)

2) Is waste accumulated for more than 90 days? ✓

If yes, complete BMT checklist

3) Is each container clearly dated with each period of accumulation so as to be visible for inspection? —

4) Is each container or tank marked or labeled with the words "hazardous waste" or in compliance with the DOT labeling requirements? —

STOP HERE IF THE HAZARDOUS WASTE MGT FACILITY (TSD) CHECKLIST IS FILLED OUT

262.34 - SHORT TERM ACCUMULATION STANDARDS

(For generators who accumulate waste in tanks or containers for 90 days or less)

40 CFR 265 - Subpart I Containers

YES NO N/A

- 265.170 - What type of containers are used for storage. Describe the size, type and quantity and nature of waste (e.g., 12 fifty-five gallon drums of waste acetone).
- 265.171 - Do the containers appear to be in good condition, not in danger of leaking?
If not, please describe the type, condition and number of leaking or corroded containers. Be detailed and specific.
- 265.172 - Are hazardous waste stored in containers made of compatible materials?
If not, please explain.
- 265.173(a) - Are all containers closed except those in use?
- 265.173(b) - Do containers appear to be properly opened, handled or stored in a manner which will minimize the risk of the container rupturing or leaking?
- 265.174 - Is the storage area inspected at least weekly?
- 265.176 - Are containers holding ignitable and reactive waste located at least 50 feet (15 meters) away from the facility's property line?
- 265.177 - Are incompatible waste stored separate from each other?

40 CFR 265 Subpart J - Tanks

YES NO N/A

265.190 1) What are the approximate number and size of tanks containing hazardous waste?

___ ___ ___

2) Identify the waste treated/stored in each tank.

265.192 - General Operating Requirements

1) Are the tanks maintained so that there is no evidence of past, present, or risk of future leaks?

___ ___ ___

If no, please explain.

2) Are there leaking tanks?

___ ___ ___

3) Are all hazardous wastes or treatment reagents being placed in tanks compatible with the tank material so that there is no danger of ruptures, corrosion, leaks or other failures?

___ ___ ___

4) Do uncovered tanks have at least 2 feet of freeboard or an adequate containment structure?

___ ___ ___

5) If waste is continuously fed into a tank, is the tank equipped with a means to stop the inflow from the tank? e.g. bypass system to a standby tank

___ ___ ___

265.194 - Inspections

1) Is the tank(s) inspected each operating day for

- a) discharge control equipment
- b) monitoring equipment
- c) level of waste in tank

___ ___ ___

___ ___ ___

___ ___ ___

2) Are the tanks and surrounding areas (e.g., dike) inspected weekly for leaks, corrosion or other failures?

___ ___ ___

3) Are there underground tanks?

___ ___ ___

If yes, how many and can they be entered for inspection?

___ ___ ___

265.198 - Are ignitable or reactive wastes stored in a manner which protects them from a source of ignition or reaction?

___ ___ ___

If no, please explain.

265.199 - Does it appear that incompatible wastes are being stored separate from each other?

___ ___ ___

YES NO N/A

265.16 - Personnel Training

- 1) Have facility personnel successfully completed a program of classroom instruction or on-the-job training within 6 months of having been employed?

___ ___ ___

If yes, have facility personnel taken part in an annual review of training?

___ ___ ___

- 2) Is there written documentation of the following:

— job title for each position at the facility related to hazardous waste management and the name of the employee filling each job?

___ ___ ___

— type and amount of training to be given to personnel in jobs related to hazardous waste management?

___ ___ ___

— actual training or experience received by personnel?

___ ___ ___

- 3) Are training records kept on all employees for at least 3 years?

___ ___ ___

40 CFR 265 - Subpart C - Preparedness and Prevention

- 265.32 Does the facility comply with preparedness and prevention requirements including maintaining:

— an internal communications or alarm system?

___ ___ ___

— a telephone or other device to summon emergency assistance from local authorities?

___ ___ ___

— portable fire equipment?

___ ___ ___

— water at adequate volume and pressure to supply water hose streams, foam producing equipment, etc.

___ ___ ___

- 265.33 Is equipment tested and maintained?

___ ___ ___

- 265.34 Is there immediate access to communications or alarm systems during handling of hazardous waste?

___ ___ ___

- 265.35 Adequate aisle space?

___ ___ ___

If no, please explain storage pattern.

In your opinion, do the types of waste on-site require all of the above procedures, or are some not needed: Explain.

___ ___ ___

40 CFR 265 - Subpart D - Contingency Plan and Emergency Procedures

- Does the facility have a written contingency plan for emergency procedures designed to deal with fires, explosions or any unplanned release of hazardous waste?

___ ___ ___

- 1) Does the plan describe arrangements made with the local authorities?

___ ___ ___

- 2) Has the contingency plan been submitted to the local authorities?

___ ___ ___

- 3) Does the plan list names, addresses and phone numbers of Emergency Coordinators?

___ ___ ___

- 4) Does the plan have a list of what emergency equipment is available?

___ ___ ___

- 5) Is there a provision for evacuating facility personnel?

___ ___ ___

- 6) Was there an emergency coordinator present or on call at the time of the inspection?

___ ___ ___

AUG 25 1983

AUG 26 8 08 AM '83

ENVIRONMENTAL PROTECTION
AGENCY
NEW YORK, N.Y. 10007

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Steven Matza
Vice President
Consolidated Aircraft, Inc.
138 Greeley Avenue
Sayville, NY 11782

Re: EPA Identification Number: NYD013561881
Facility Location: Same
Inspection Date: April 19, 1983

Dear Mr. Matza:

SW 60 10102

The Environmental Protection Agency (EPA) is charged with the responsibility for implementing the Resource Conservation and Recovery Act (RCRA) and its associated regulations: Title 40 of the Code of Federal Regulations (40 CFR) Parts 260-267, and 270-271.

By notification you informed EPA that you conduct activities involving hazardous waste subject to RCRA at the above referenced facility. In accordance with EPA's responsibility, an inspection was performed at this facility by a duly authorized representative of EPA. This inspection revealed that the following regulatory violations existed at the time of the inspection:

¶ 40 CFR §262.31 states that, before shipment, a generator must label each package in accordance with the applicable Department of Transportation regulations on hazardous materials at 49 CFR Part 172. At the time of inspection, hazardous waste at this facility was not properly labeled. You were therefore in violation of 40 CFR §262.31.

¶ 40 CFR §262.32(a) states that, before shipment, a generator must mark each package of hazardous waste in accordance with the applicable Department of Transportation regulations on hazardous materials under 49 CFR Part 172. At the time of the inspection, hazardous waste at this facility was not properly marked. You were therefore in violation of 40 CFR §262.32(a).

¶ 40 CFR §262.32(b) states that a generator must mark each container of 110 gallons or less that will be transported off-site, with the words required in 40 CFR §262.32(b). At the time of the inspection, such containers of hazardous waste were not marked in compliance with this regulation. You were therefore in violation of 40 CFR §262.32(b).

*9H
HWA/MS
8/31/83*

6/23

§ 40 CFR §265.13(b) requires that the owner or operator of a hazardous waste treatment, storage or disposal facility must develop and follow a written waste analysis plan. At the time of the inspection, information present at your facility was insufficient to meet the requirements of this section. You were therefore in violation of 40 CFR §265.13(b).

§ 40 CFR §265.14(c) requires a sign to be posted at the hazardous waste storage area with the legend "Danger - Unauthorized Personnel Keep Out." At the time of the inspection, no such sign was present at the facility. You were therefore in violation of 40 CFR §265.14.

§ 40 CFR §265.15 requires that the owner or operator of a hazardous waste facility must develop and follow a written schedule of inspections for certain specified portions of its facility. The owner or operator must also retain a record of these inspections in a log or summary. At the time of the inspection, documents available at your facility were insufficient to meet the requirements of this section. You were therefore in violation of 40 CFR §265.15.

§ 40 CFR §265.16(d) requires that the owner or operator of a hazardous waste facility must maintain written documentation of personnel, jobs and job-related training conducted at the facility. Documentation which existed at the facility at the time of the inspection was insufficient to meet the requirements of this section. You were therefore in violation of 40 CFR §265.16(d).

§ 40 CFR §265.51 requires that the owner and operator of a hazardous waste facility must have a written contingency plan for the facility designed to minimize hazards to human health or the environment from any unplanned release of hazardous waste constituents. 40 CFR §265.52 describes the required contents of the contingency plan. At the time of the inspection, the content of this plan was insufficient to meet the requirements of this section. You were therefore in violation of 40 CFR §265.51.

§ 40 CFR §265.73 requires that the owner or operator of a hazardous waste facility must maintain an operating record at the facility containing certain required information, including a description of the type, quantity, and location of all wastes held at the facility. At the time of the inspection, documents available were insufficient to meet the requirements of this section. You were therefore in violation of 40 CFR §265.73.

§ 40 CFR §265.112 requires that the owner or operator of a hazardous waste facility must develop and maintain at the facility a written closure plan which describes the steps necessary to close all or part of the facility. At the time of the inspection, documents available were insufficient to meet the requirements of this section. You were therefore in violation of 40 CFR §265.112.

It is requested that, within sixty (60) days of your receipt of this letter, you send a letter to this office outlining the remedial actions taken or to be taken to correct these deficiencies. Also, you should be aware that these violations have resulted in your facility being designated as a high priority site for reinspection during 1983.

Please address response to:

Ernest A. Regna
Chief, Solid Waste Branch
Air and Waste Management Division
U. S. Environmental Protection Agency, Region II
26 Federal Plaza
New York, NY 10278

with copies to:

Richard A. Baker
Chief, Permits Administration Branch
U. S. Environmental Protection Agency, Region II
26 Federal Plaza
New York, NY 10278

and

James Neil
Regional Solid Waste Engineer, Region I
New York State Department of Environmental Conservation
Building 40
State University of New York
Stony Brook, NY 11790

You must include your EPA identification number on all correspondence.

Your failure to respond to this letter may cause this matter to be forwarded to our attorneys for further enforcement action.

Should you have questions about this Notice or should you wish to discuss this matter further, please contact Frank Langone of my staff at (212) 264-2073. A copy of the inspection report is enclosed.

Sincerely yours,

Ernest A. Regna
Chief
Solid Waste Branch

Enclosure

cc: David Maffrici, Chief,
Bureau of Hazardous Waste Operations, NYSDEC, w/o encl.

James Hall
Regional Solid Waste Engineer, Region 1, NYSDEC, w/o encl.

bcc: Frank A. Langone, 2AWM-SW w/encl.
Richard A. Baker, 2PM-PA w/o encl. ✓

Consolidated AIRCRAFT SUPPLY CO., INC.



Foreign & Domestic Sales
138 GREELEY AVENUE, SAYVILLE, L. I., N. Y. 11782

Telephone: 516/589-6400

Cable Address CONAIRSUP

October 24, 1983

Mr. Ernest A. Regna
Chief, Solid Waste Branch
Air and Waste Management Division
U.S. Environmental Protection Agency, Region II
26 Federal Plaza
New York NY 10278

Dear Mr. Regna:

Re: EPA Identification Number: NYD013561881
Letter dated August 25, 1983

In response to your letter we have taken the following remedial actions:

- [1] 40 CFR 262.31 We have obtained the proper labeling and our collection drum has been properly labeled.
- [2] 40 CFR 262.32a We have obtained the proper labeling and our collection drum is properly identified for shipment.
- [3] 40 CFR 262.32b We have marked our collection drum per 262.32.
- [4] 40 CFR 265.13b A waste analysis plan has been written.
- [5] 40 CFR 265.15 A log has been opened to record the condition of waste handling equipment and the amount of waste collected and transported.
- [6] 40 CFR 265.16D We now have written documentation on personnel and job-related training.
- [7] 40 CFR 265.51 At present there is no imaginable way for a spillage to occur. In the very unlikely event that this does happen, we have ample protective clothing to protect clean-up personnel.
- [8] 40 CFR 265.73 We now have an operating record with a description, quantity and location of the waste we generate and store.

PERMITS BRANCH
OCT 27 3 39 AM '83
U.S. ENVIRONMENTAL PROTECTION AGENCY
NEW YORK, N.Y. 10007

E0303

gm
RWMS
11/17/83

October 24, 1983

[8] CFR 265.112 At this time there is no possible waste accident that would cause our facility to close. We generate approximately 55 gallons of water soluble, non-flammable sludge per year. In the unlikely event that we would have to close, there is sufficient manpower and resources to handle any anticipated problem.

We hope this is satisfactory to fulfill your requirements.

Very truly yours,

CONSOLIDATED AIRCRAFT SUPPLY CO., INC.



Steven Matza
Vice President

c.c.: Richard A. Baker ✓
Chief, Permits Administration Branch
U.S. Environmental Protection Agency, Region II
26 Federal Plaza
New York, NY 10278

and

James Heil
Regional Solid Waste Engineer, Region 1
New York State Department of Environmental Conservation
Building 40
State University of New York
Stony Brook NY 11790

SM/dr

THIS LETTER WAS SENT TO THE ATTACHED LIST

Re: Reclassification of EPA I.D. No. NYD013561881

Dear Mr. Matza

The New York State Department of Environmental Conservation (DEC) is now fully responsible for administration of the Resource Conservation and Recovery Act (RCRA) regulatory program for hazardous waste facilities operating under interim status with Part A RCRA Permits.

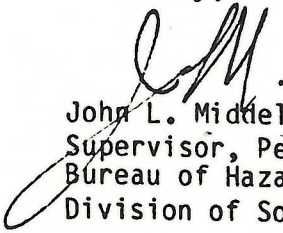
In order to qualify as an interim status hazardous waste treatment, storage or disposal (TSD) facility pursuant to Section 3005(e) of RCRA and 6NYCRR Part 373, a facility was required to be in existence on November 19, 1980, and to be conducting a hazardous waste activity requiring a RCRA and/or Part 373 Permit. Based on information submitted by your company, it appears that your facility has never qualified for interim status pursuant to Section 3005(e) of RCRA and/or 6NYCRR Part 373, insofar as it never conducted a RCRA or 373 permittable activity. Therefore, DEC considers your facility to never have operated with interim status under a Part A Permit.

If you have any information which would otherwise indicate that your facility had or does qualify for interim status under RCRA or Part 373, it must be submitted within 14 calendar days of the date of this letter. If you do not respond to this letter within the time provided, your facility will be removed from the list of active TSD facilities.

Please be advised that withdrawal of your Part A Permit application terminates your privilege to operate with interim status in the future. Should you decide to conduct any activity not exempt from the permit requirements of 6NYCRR Part 373 and/or 40 CFR Parts 264, 265 and 270, you must first obtain full Part 373 and RCRA Permits. Failure to obtain the proper permits will subject you to enforcement actions pursuant to Section 3008 of RCRA and Article 27, Titles 7 and 9 of the Environmental Conservation Law.

Should you have any questions concerning this matter, please contact Mr. Robert Kircher, of my staff, at (518) 457-3274.

Sincerely,


John L. Middelkoop, P.E.
Supervisor, Permits Section
Bureau of Hazardous Waste Technology
Division of Solid and Hazardous Waste

cc: Richard A. Baker (EPA Region II - Permits Administration Branch)
Stan Siegal (EPA Region II - Solid Waste Branch)
David Mafrici (NYSDEC - Bureau of Hazardous Waste Operations)
Regional Solid Waste Engineer, Region _____

bcc: P. Counterman
J. Middelkoop
R. Kircher

Paul Sickie
President
Hilord Chemical Corporation
70 Engineers Road
Hauppauge, NY 11788

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Glen Cove, NY 11542

Steven Matza
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Klaus W. Buzzi
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East Meadows, NY 11554

John Tillotson
Cerro Conduit Company
Millers Road & Robbins Lane
Syosset, NY 11791

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Long Island City, NY 11101

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Poughkeepsie, NY 12603

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Beacon, NY 12508

Barry Douglas
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Mount Vernon, NY 10550

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Pickett Simpson
EFC Corporation
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Ogdensburg, NY 13669

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Oswego, NY 13126-0028

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Dewitt, NY 13214

Roger R. Walker
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Hammondsport, NY 14840

Robert V. Devitt
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Elmira, NY 14901

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Rochester, NY 14602

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Lionville, Pa. 19353

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Plant Manager
Chemteck Industries
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P.O. Box 215
Solvay, NY 13209

Von Dungen Emil Buffalo
83 Anderson Road
Buffalo, NY 14225

Mr. John F. Short
President
Surface Finish Technologies
215 Judson Street
Elmira, NY 14901

Timothy J. Gaffney
Regulatory Administrator
Jones Chemicals, Inc.
100 Sunny Sol Blvd.
Caledonia, NY 14423

THIS LETTER WAS SENT TO THE ATTACHED LIST

can't find
it.

Re: Reclassification of EPA I.D. No. NYD013561881

Dear Mr. Churchill

The New York State Department of Environmental Conservation (DEC) is now fully responsible for administration of the Resource Conservation and Recovery Act (RCRA) regulatory program for hazardous waste facilities operating under interim status with Part A RCRA Permits.

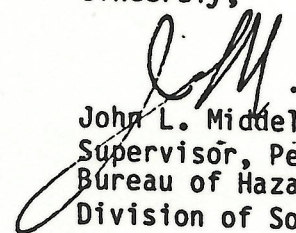
In order to qualify as an interim status hazardous waste treatment, storage or disposal (TSD) facility pursuant to Section 3005(e) of RCRA and 6NYCRR Part 373, a facility was required to be in existence on November 19, 1980, and to be conducting a hazardous waste activity requiring a RCRA and/or Part 373 Permit. Based on information submitted by your company, it appears that your facility has never qualified for interim status pursuant to Section 3005(e) of RCRA and/or 6NYCRR Part 373, insofar as it never conducted a RCRA or 373 permitable activity. Therefore, DEC considers your facility to never have operated with interim status under a Part A Permit.

If you have any information which would otherwise indicate that your facility had or does qualify for interim status under RCRA or Part 373, it must be submitted within 14 calendar days of the date of this letter. If you do not respond to this letter within the time provided, your facility will be removed from the list of active TSD facilities.

Please be advised that withdrawal of your Part A Permit application terminates your privilege to operate with interim status in the future. Should you decide to conduct any activity not exempt from the permit requirements of 6NYCRR Part 373 and/or 40 CFR Parts 264, 265 and 270, you must first obtain full Part 373 and RCRA Permits. Failure to obtain the proper permits will subject you to enforcement actions pursuant to Section 3008 of RCRA and Article 27, Titles 7 and 9 of the Environmental Conservation Law.

Should you have any questions concerning this matter, please contact Mr. Robert Kircher, of my staff, at (518) 457-3274.

Sincerely,


John L. Middelkoop, P.E.
Supervisor, Permits Section
Bureau of Hazardous Waste Technology
Division of Solid and Hazardous Waste

cc: Richard A. Baker (EPA Region II - Permits Administration Branch)
Stan Siegal (EPA Region II - Solid Waste Branch)
David Mafrici (NYSDEC - Bureau of Hazardous Waste Operations)
Regional Solid Waste Engineer, Region _____

bcc: P. Counterman
J. Middlekoop
R. Kircher

Paul Sickle
President
Hilord Chemical Corporation
70 Engineers Road
Hauppauge, NY 11788

NYD 065949604

Peter Kaczanowski
Dzus Fastener Company, Inc.
425 Union Blvd.
West Islip, NY 11795

NYD 002043701

Michael Francy
Limco Manufacturing Company
Garvies Point Road
Glen Cove, NY 11542

NYD 002038719

Steven Matza
Consolidated Aircraft
138 Greeley Ave.
Sayville, NY 11782

NYD 013561881

Klaus W. Buzzi
Nassau County Medical Center
2201 Hempstead Tpke.
East Meadows, NY 11554

NYD 060318250

John Tillotson
Cerro Conduit Company
Millers Road & Robbins Lane
Syosset, NY 11791

NYD 092363431

Raymond C. Pflieger, Ph.D.
Mount Sinai Medical Center
Director, Inst. Safety Program
1 Gustave L. Levy Place
New York, NY 10029

NYD 058302266

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Propper Manufacturing Co.
36 04 Skillman Ave.
Long Island City, NY 11101

NYD 001483130

Robert E. Schaefer
Vice President - Manufacturing
Fargo Manufacturing Company
130 Salt Point Rd., P.O. Box 3400
Poughkeepsie, NY 12603

NYD 071594550

Bob Toth
Attn: John Lazarony, Jr.
Morris & Andros Engr. Consultants
Tuck Industries, Inc.
248 Tioronda Ave.
Beacon, NY 12508

NYD 001396894

Barry Douglas
Red Devil Paints & Chemicals
30 North West Street
Mount Vernon, NY 10550

NYD 05630971

Lewis DeCarlo
Vice President
Pawling Rubber Corporation
157 Maple Blvd.
Pawling, NY 12564

NYD 001354349

Erwin Gutkin
VA W of America, Inc.
Route 209
Ellenville, NY 12428

NYD 002090991

Timothy J. Gaffney
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Jones Chemicals, Inc.
100 Sunny Sol Blvd.
Caledonia, NY 14423

NYD 000813428

Norman W. Zielonko
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Capital District Tool & Die Company, Inc.
22 Paine Street
Green Island, NY 12183

NYD 002076222

Mark P. Audet
General Foods Corporation
P.O. Box 366, Geyser Road
Saratoga Springs, NY 12866

NYD 002069789

Michael J. Stewart
Husmann Refrigeration, Inc.
East State Street Ext.
Gloversville, NY 12078

NYD 002064087

Pickett Simpson
EFC Corporation
50 Wolf Road
Albany, NY 12233

?

Steven E. Cochems
General Manager
Standard Shade Roller
P.O. Box 578
Ogdensburg, NY 13669

NYD 002233245

Thomas Catalano
Climax Manufacturing Company, Inc.
Climax Street
Castorland, NY 13620

NYD 002227841

David J. Lagoe
Supervisor of Labs & Env. Affairs
Alcan Rolled Products Company
Lake Road North
Oswego, NY 13126-0028

Edward J. Radin, P.E.
Ozalid Corporation
25 Ozalid Road, P.O. Box 2000
Binghamton, NY 13902

NYD000824474

Robert Wolf
Plant Engineer
Oberdorfer Foundaries, Inc.
Thompson Road
Dewitt, NY 13214

NYD002225779

Roger R. Walker
Clark Specialty Company, Inc.
Route 54
Hammondsport, NY 14840

NYD002208767

Robert V. Devitt
The Hilliard Corporation
100 West 4th Street
Elmira, NY 14901

NYD002206530

Scott M. Laugdon
General Railway Signal Corp.
P.O. Box 600
Rochester, NY 14602

NYD057939506

Robert J. Szykowski
Twin Lake Chemical, Inc.
520 Mill Street
Lockport, NY 14034

NYD074045139

John Churchill
Jamestown EO, PG, WS
P.O. Box 1137
Jamestown, NY 14701

NYD002115152

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Kittinger Company
1893 Elmwood Ave.
Buffalo, NY 14207

NYD057983876

Lawrence B. MacDonald
Transparent Bg. Co. of Bo. Ic.
75 Isabelle St.
Buffalo, NY 14207

NYD002129229

Robert Mesanovic
Project Engineer
Ferro Corporation
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NYD 043814 003

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QualiTROL Corporation
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Fairport, NY 14450

NYD 002209716

Edward A. Fanelli
Assistant Secretary
GTE Products Corporation
~~One Stamford Forum~~
Stamford, CT 06904

?

James A. Rakitsky, C.E.
Engineering & Environmental Service Dept.
Chemical Leaman Tank Lines, Inc.
P.O. Box 200
Lionville, Pa. 19353

?

Ms. Lynn Hamlin
Plant Manager
Chemteck Industries
321 Bridge Street
P.O. Box 215
Solvay, NY 13209

NYD 066799 263

Von Dungen Emil Buffalo
83 Anderson Road
Buffalo, NY 14225

NYD 002 104982

Mr. John F. Short
President
Surface Finish Technologies
215 Judson Street
Elmira, NY 14901

NYD 002223 287

C1103=\$
C305=\$

Timothy J. Gaffney
Regulatory Administrator
Jones Chemicals, Inc.
100 Sunny Sol Blvd.
Caledonia, NY 14423

NYD 0008 13428 ✓

Rec 3/13
copy & file

TO PAB 4/3/86

See CC: All NY staff
pls review your
facilities + forward
to PAB your
concerns.

40

THIS LETTER WAS SENT TO THE ATTACHED LIST

Re: Reclassification of EPA I.D. No. NYD013561881

Stan

Dear Mr. _____

The New York State Department of Environmental Conservation (DEC) is now fully responsible for administration of the Resource Conservation and Recovery Act (RCRA) regulatory program for hazardous waste facilities operating under interim status with Part A RCRA Permits.


In order to qualify as an interim status hazardous waste treatment, storage or disposal (TSD) facility pursuant to Section 3005(e) of RCRA and 6NYCRR Part 373, a facility was required to be in existence on November 19, 1980, and to be conducting a hazardous waste activity requiring a RCRA and/or Part 373 Permit. Based on information submitted by your company, it appears that your facility has never qualified for interim status pursuant to Section 3005(e) of RCRA and/or 6NYCRR Part 373, insofar as it never conducted a RCRA or 373 permit-table activity. Therefore, DEC considers your facility to never have operated with interim status under a Part A Permit.

If you have any information which would otherwise indicate that your facility had or does qualify for interim status under RCRA or Part 373, it must be submitted within 14 calendar days of the date of this letter. If you do not respond to this letter within the time provided, your facility will be removed from the list of active TSD facilities.

Please be advised that withdrawal of your Part A Permit application terminates your privilege to operate with interim status in the future. Should you decide to conduct any activity not exempt from the permit requirements of 6NYCRR Part 373 and/or 40 CFR Parts 264, 265 and 270, you must first obtain full Part 373 and RCRA Permits. Failure to obtain the proper permits will subject you to enforcement actions pursuant to Section 3008 of RCRA and Article 27, Titles 7 and 9 of the Environmental Conservation Law.

Should you have any questions concerning this matter, please contact Mr. Robert Kircher, of my staff, at (518) 457-3274.

Sincerely,


John L. Middelkoop, P.E.
Supervisor, Permits Section
Bureau of Hazardous Waste Technology
Division of Solid and Hazardous Waste

cc: Richard A. Baker (EPA Region II - Permits Administration Branch)
Stan Siegal (EPA Region II - Solid Waste Branch)
David Mafriqi (NYSDEC - Bureau of Hazardous Waste Operations)
Regional Solid Waste Engineer, Region _____

bcc: P. Counterman
J. Middlekoop
R. Kircher

Consolidated AIRCRAFT SUPPLY CO., INC.

Send notification packet

Foreign & Domestic Sales
55 RAYNOR AVENUE, RONKONKOMA, L.I., N.Y. 11779

Telephone: 516-981-7700

WATS 800-422-6300

FAX 516-981-7706

TWX 5102220279 CONAIRSUP

NYD013561881

August 2, 1988

U.S. EPA - Region 2
26 Federal Place
New York, NY 10278
Attn: P.A.B. - Rm 432

Dear Sir:

As of July 1988, Consolidated Aircraft is signed on with Chemical Pollution Control Co. for a quarterly pickup of our waste. As a small generator of waste, less than 5 gallons per quarter, we would like to be recertified as a small quantity generator. Please note our new address if you have any need to correspond.

Thanks,



Gary Matza

RECEIVED
AUG 10 11:56
BRANCH
U.S. EPA - REGION 2
NEW YORK, NY 10278

ORIE MATZA, Pres.

Consolidated AIRCRAFT SUPPLY CO., INC.

89 DEC 26 PM 2:22

Foreign & Domestic Sales

55 RAYNOR AVENUE, RONKONKOMA, L.I., N.Y. 11779

Telephone: 516-981-7700

WATS 800-422-6300

FAX 516-981-7706

TWX 5102220279 CONAIRSUP

December 22, 1989

E. P. A.
Region #2
Permits Administration Branch
26 Federal Plaza
New York, New York 10278

Dear Sir:

Consolidated Aircraft would like to be changed to an exempt generator therefore enabling us to change to a different manifest.

I have written Albany and possibly your office before and I'm told you still have my old address at 138 Greeley. Please note new address.

Attached are copies of manifests showing we generate less than 27 gallons in a 30 day period. My E.P.A. # NYDO 13561881 is not needed and can be dropped.

Please respond so I can notify my waste remover of new classification in writing

Yours truly,

GARY MATZA

GM:ntp
Enc.

✓
Notification
packet sent
to requester
12/27/89

✓ C1101 = \$ NH
12/27/89 ✓ C303 = 1 NH

copy to DEC

copy to dec v 3/19/90

ORIE MATZA, Pres.

Consolidated AIRCRAFT SUPPLY CO., INC.

File
NYD013561881

Foreign & Domestic Sales
55 RAYNOR AVENUE, RONKONKOMA, L.I., N.Y. 11779

Telephone: 516-981-7700

WATS 800-422-6300

FAX 516-981-7706

TWX 5102220279 CONAIRSUP

March 15, 1990

✓ no change to c303

E.P.A.
Region #2
Permits Administration Branch
26 Federal Plaza
New York, NY 10278

✓ C1101=3

✓ CMT

3/20/90 ✓

Dear Sir:

As a result of letter enclosed dated 12/22/89, I have been assigned a new EPA number NYD986887412 for my new building.

I would again like to request that we be classified as an exempt generator for this number.

Yours Truly,



Gary Matza

C.P.C. JOHN 576 -0333

ORIE MATZA, Pres.

Consolidated AIRCRAFT SUPPLY CO., INC.

Pepe

*On Red Manifest
Dark red border
BY EPA# EXEMPT*

December 22, 1989

Foreign & Domestic Sales

55 RAYNOR AVENUE, RONKONKOMA, L.I., N.Y. 11779

Telephone: 516-981-7700

WATS 800-422-6300

FAX 516-981-7706

TWX 5102220279 CONAIRSUP

E. P. A.

Region #2

Permits Administration Branch

26 Federal Plaza

New York, New York 10278

*Deactivated PERD.
312 264 9880 - Albany
518 957 0530 - Albany
TONY ZAPPALÀ
STATE*

Dear Sir:

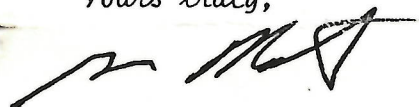
Consolidated Aircraft would like to be changed to an exempt generator therefore enabling us to change to a different manifest.

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Please respond so I can notify my waste remover of new classification in writing

Yours truly,



GARY MATZA

GM:ntp

Enc.